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FILED

Feb 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J25779 (6)
1. Corporation Name
KEITH A. RINGELSPAUGH, P.A.

Principal Place of Business

Mailing Address

% KEITH A. RINGELSPAUGH
501 FIRST AVE. NO.
ST. PETERSBURG FL 33701

% KEITH A. RINGELSPAUGH
501 FIRST AVE. NO.
ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/24/1986

4. FEI Number

59-2709606

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

2a. Mailing Address

21 c/o KEITH A. RINGELSPAUGH

26 c/o KEITH A. RINGELSPAUGH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 3347 49th St. No.

27 3347 49th St. No.

City & State

City & State

23 ST. PETERSBURG

28 ST. PETERSBURG

Zip

Country

Zip

Country

24 33710

25 USA

29 33710

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RINGELSPAUGH, KEITH A.
1 4TH ST. N.
SUITE 900
ST. PETERSBURG FL 33701

81 Name

KEITH A. RINGELSPAUGH

82 Street Address (P.O. Box Number is Not Acceptable)

3347 49th St. No.

83

84 City

ST. PETERSBURG

FL

85 Zip Code

33710

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

KEITH A. RINGELSPAUGH

KEITH A. RINGELSPAUGH

2-13-98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RINGELSPAUGH, KEITH A.
STREET ADDRESS 501 FIRST AVE. NO. SUITE 401
CITY-ST-ZIP ST. PETERSBURG FL 33701

1.1 TITLE PD
1.2 NAME KEITH A. RINGELSPAUGH
1.3 STREET ADDRESS 3347 49th St. No.
1.4 CITY-ST-ZIP ST. PETERSBURG, FL 33710

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

KEITH A. RINGELSPAUGH

KEITH A. RINGELSPAUGH

2-13-98 (813) 525-1958

CR2E034 (10/97)